



# IHCP Provider Meeting Secretary Update

Oct. 11, 2022



# Welcome!

## Today's Agenda

- Long-Term Services and Supports Reform Update
  - Managed Long-Term Services and Supports
  - HCBS Waiver Updates
  - Direct Service Workforce
- Mental Health

# Long-Term Services and Supports



# Indiana's Path to Long-term Services and Supports Reform

## Our Objective

- 1) 75% of new LTSS members will live and receive services in a home and community-based setting
- 2) 50% of LTSS spend will be on home- and community-based services

## Key Results (KR\*) to Reform LTSS

- 1 Ensure Hoosiers have access to home- and community-based services within 72 hours
- 2 Move LTSS into a managed model
- 3 Link provider payments to member outcomes (value-based purchasing)
- 4 Create an integrated LTSS data system linking individuals, providers, facilities, and the state
- 5 Create and implement a person-centered, statewide plan – the Indiana Direct Service Workforce Plan – to improve the recruitment, training, support, and retention of direct service workers in home and community-based settings.
- 6 Create and implement a regulatory and reimbursement home health roadmap that expands capacity and increases equitable, person-centered delivery across Medicaid
- 7 Foster a positive and smooth experience for waiver recipients and providers by enhancing the Aged & Disabled and Traumatic Brain Injury (TBI) waiver structure through the operational transition across FSSA divisions

# Managed Long-Term Services & Supports



Advancing the Governor's MLTSS initiative to ensure that individuals have a **choice** to age in an environment that best suits their needs and preferences and delivers **quality** care under a **sustainable**, accountable and integrated system.

## What the Program Will Do

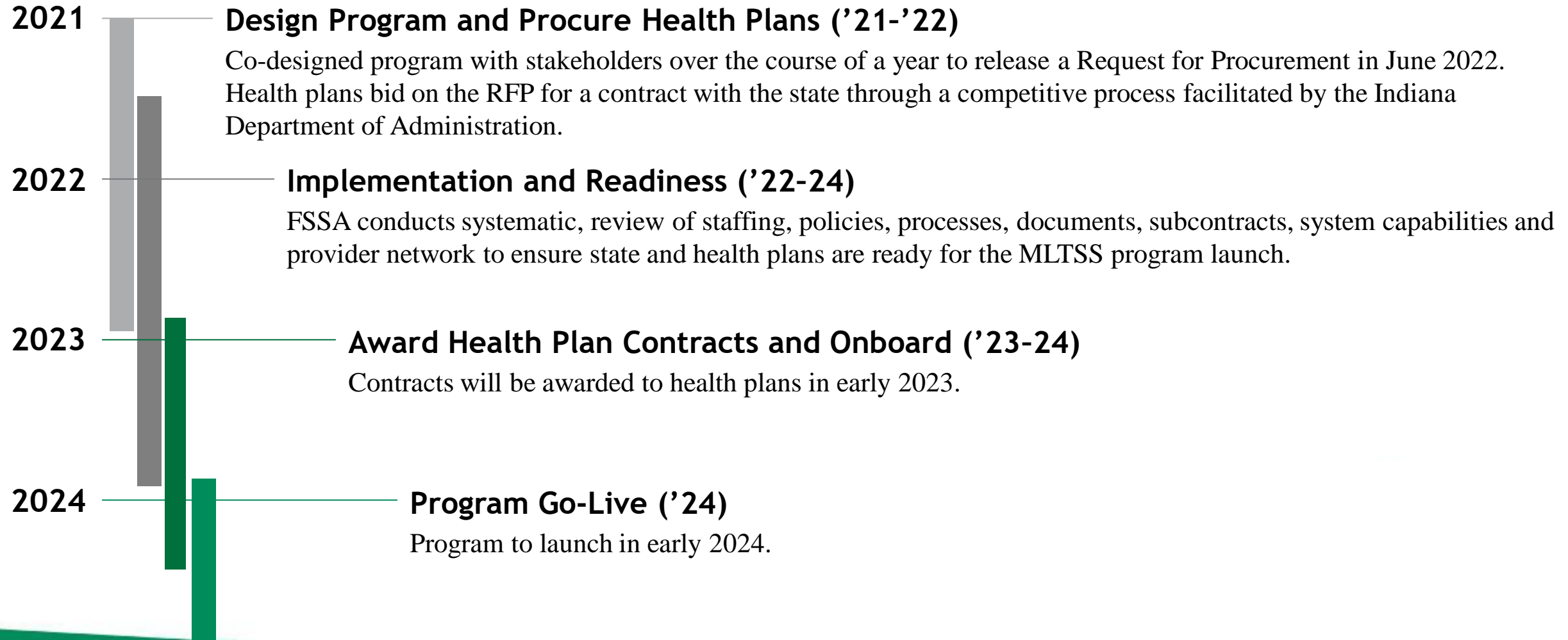
- Ensure experienced health plans to coordinate a Medicaid member's LTSS benefits and other benefits such as Medicare
- Serve a growing population (100k+) of Hoosiers 60 and older, including those with disabilities
- Support members and caregivers to have the choice to remain in their homes and communities

## Continuous Stakeholder Engagement



300+ meetings with members and caregivers, providers, national experts, etc. to ensure a diverse range of voices is represented.

# MLTSS Milestones



# MLTSS Readiness Review

## What is Readiness Review?

- A systematic, phased, program-specific review conducted before members enrolled in selected managed care programs (most recent: HCC in 2019 and HIP/HHW in 2022)
- Assures that MCEs are ready to: accept enrollment; provide the necessary continuity of care; ensure access to the necessary spectrum of providers; and meet the diverse needs of the population
- Contract and payment are contingent upon readiness verification



MCEs will submit thousands of compliance and readiness documents, including policies, procedures, provider files and contracts.



FSSA subject matter experts will review every document and a team of FSSA subject matter experts will score demonstrations. MCEs must pass each phase of testing / readiness before proceeding.

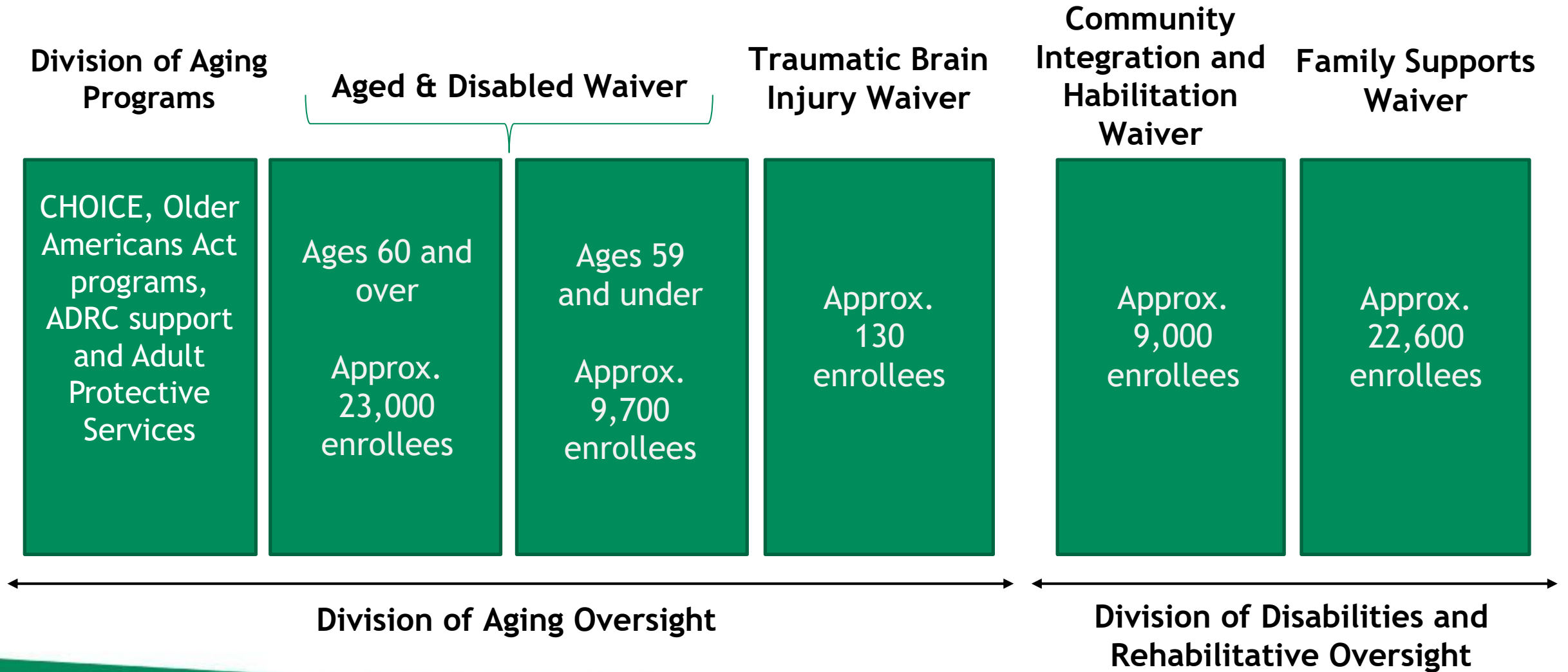


FSSA will go to MCE facilities for onsite demonstrations of MCE capabilities.



Additional demonstrations will be required until readiness can be verified. If readiness cannot be verified, the MCE will not go live.

# Current FSSA HCBS Programs\*



\*Excluding DMHA waivers



# Aged & Disabled & Traumatic Brain Injury HCBS Waiver Oversight Transition

## Current A&D Waiver, Ages 59 & Under

Transition oversight to DDRS. Focus on those with disabilities in A&D waiver, particularly those under age 60.

## New Waiver A&D Ages 60+ (MLTSS)

Transition oversight to OMPP. As announced previously, creation of new waiver and administration for A&D waiver recipients 60+. This is our new MLTSS program.

## Current TBI Waiver

Transition oversight to DDRS.

## DDRS' Current CIH & FSW Waivers

DDRS will continue existing redesign activities as previously announced in the Path Forward document this summer.

## Non-Waiver Programs for Older Adults

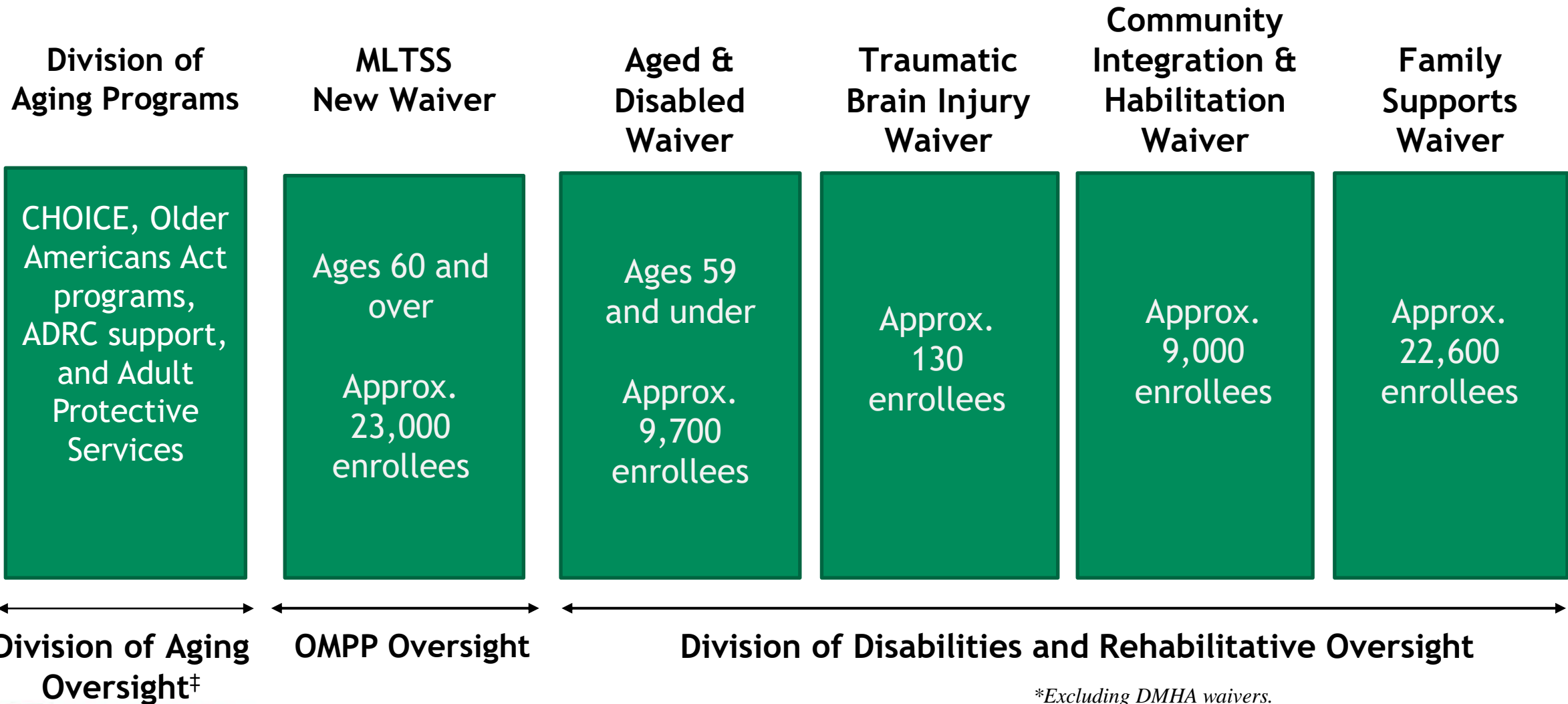
Division of Aging will continue to focus efforts on operating other existing programs such as CHOICE, Older Americans Act programs, ADRC support, and Adult Protective Services

**Objective:** Foster a positive and smooth experience for HCBS waiver recipients and providers by enhancing the A&D and TBI waiver administration through the transition across FSSA divisions.

### **Assurances:**

- Engage stakeholders, leveraging some existing engagement venues
- Ensure continuity of services and preserve the maintenance of effort in place for the enhance HCBS funds
- Communicate transparently
- Reduce member and provider abrasion
- Share a timeline as more details are developed

# Future FSSA HCBS Programs\*



*\*Excluding DMHA waivers.  
‡The Division of Aging will continue to provide support and subject matter expertise to OMPP and DDRS in managing HCBS waivers.*

# Waiver Transition Stakeholder Engagement Opportunities

- Virtual listening sessions will be scheduled throughout October
- BDDS Waiver Redesign and LTSS Reform for Older Adults webpages will be maintained
- DDRS' current Building Bridges quarterly meetings will continue and expand to include A&D Waiver and TBI Waiver participants
- Many MLTSS Implementation (for 60+ only) conversations will continue, including:
  - MLTSS Codesign Meetings
  - Community Conversations with ADvancing States

# Direct Service Workforce Plan

**Objective:** Create and implement a person-centered, statewide plan—the Indiana Direct Service Workforce Plan—to improve the recruitment, training, support, and retention of direct service workers in home- and community-based settings.



- Engaged the Bowen Center to develop an Indiana DSW Plan focused with the purpose of better recruiting, training, retaining, and supporting DSWs in HCBS
- Created Indiana's first Direct Service Worker Advisory Board
- Focused on intentional and frequent engagement, including a six-hour stakeholder workshop on 7/26



**Key Categories in Indiana DSW Plan**

# Mental Health



# Division of Mental Health and Addiction: Crisis Response



**Someone  
to Contact**

**\$44M Invested**

- Launched 988 in July
- Five Call Centers answering 988



**Someone  
to Respond**

**\$24M Invested**

- Funded four mobile crisis pilot contracts



**A Safe Place  
for Help**

**\$49M Invested**

- Four Community Catalyst Grants funding crisis support units
- Upcoming opportunities to add more CSUs

# DMHA: Community Catalyst Investments

DMHA has strategically invested federal funds to build towards an integrated and upstream behavioral health system, including investments in community-driven programming through a statewide RFF.

## Community Catalyst Grant Program

**\$55M**

Awarded to **37** grantees across the State  
(including **\$22.4M** in grant match)



- **68** proposals received from coalitions of providers, non-profits, units of local government, public schools/universities and/or hospital organizations
- Grantees will carry out a wide range of programming to enhance the **quality, integration** and **access** of mental health and substance use disorder prevention, intervention, treatment and recovery services
- Prioritized equity, sustainability and collaboration

## Grant Coverage

